



Seminar information form

Version 2008 (To be filled before selection for the Seminar program)

SEMINAR PARTICIPANT APPLICATION FORM

PLACE PHOTO

HERE

First Name	
Family name	
Gender	
Address	
Date Of Birth (dd/mm/yyyy)	
Home Tel	+961-
Mobile Number of participant	+961-
Email address of participant	
Parents Occupations/Business	
Parents Mobile Number(mother/father)	+961-
Parents E-mail address	

PROOF OF AGE MUST BE ENCLOSED!!

- PROGRAM REFERENCE NUMBER _____
- HOSTING COUNTRY _____

SOME MORE INFORMATION ABOUT YOU:

- WHAT OTHER NATIONALITY DO YOU HOLD? _____



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WHAT IS YOUR CISV BACKGROUND? (If you have previously attended a Seminar Camp you may NOT attend a second time.)

• **IF NO CISV BACKGROUND, HOW DID YOU GET TO KNOW ABOUT CISV?** _____

CISV policy encourages electronic communication; but no personal information is distributed without prior permission nor provided to other organizations by CISV International for “commercial gain” / profit.

Certification:

I have no criminal convictions or history of mental illness, emotional counselling, violent behaviour, alcohol / drug abuse, prejudice, etc that would disqualify me from participating in CISV’s international peace education and cross-cultural programmes.

Tick the box if you agree with your personal information being distributed within CISV for the purpose of communication only

I have received / reviewed copies of CISV guidelines regarding privacy, discrimination, selection and behaviour, in addition to financial information and specific programme or activity descriptions, which outline my relevant duties / obligations and potential sanctions for their violation. I agree to meet CISV’s conditions / guidelines as outlined in this material regarding my participation and membership and to provide accurate, current information in my CISV Health and Legal Forms.

NAME TWO REFERENCES YOU KNOW WHO ARE CISV MEMBERS:

1. _____ TEL: _____

2. _____ TEL: _____

SIGNATURES:

- My signature confirms that all information provided to CISV is a true record and that I have withheld no information.

- Parental signature is required by CISV International rules even if Applicant is of legal age.

APPLICANT SIGNATURE: _____

PARENT/GARDIAN OF APPLICANT SIGNATURE: _____



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DATE: _____

YOUR NA MUST RETURN THIS REPLY FORM (WITH ALL SIGNATURES) AND PROOF OF AGE DOCUMENTATION TO SECURE THE INVITATION

I certify that all CISV rules regarding Seminar Camp selection have been observed and that our NA will pay all CISV International fees and insurance upon invoice.

Signature of CISV member responsible for SEMINAR selection.		
<i>Please print name</i>		(Day / Month / Year)

!! REQUIRED DOCUMENTS !!

- One totally filled CISV application form + names of 2 CISV referees.
- 2 recent passport-size photo
- Photocopy of the first page of a valid (at least 6 months after travel) Lebanese /Foreign passport
- School administration recommendation form (for kids) OR University Administration Form (for Student Staff or Leaders) OR Employer’s Letter (for employed Staff & Leaders)
- General medical report from applicant’s own physician stating that he/she is in good health and can participate unconditionally in a CISV activity
- Signed “APPROVAL” form of the Infopack by your parents!



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!! READ & APPROVED !!

We have read & approved all the conditions mentioned in the “CISV INFOPACK” and have submitted all required documents

Name of participant

Name of Parents & their Signatures

Mother _____

Father _____

Date _____

N.B Please do not forget to keep copies with you for your own referral.